

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.	: 10/063,088	Confirmation No.: 6422
Applicant:	: Michael G. Cousin	
Filed:	: 03/18/2002	
Art Unit	: 3677	
Examiner	: Dinesh Melwani	
Docket No.	: 1202.03	
Customer No.	: 21901	
For	: Pop Beads Having Elongated Necks	

Faxed to Technology Center 3600 at (703) 872-9326
Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is an independent inventor. A statement was already filed.

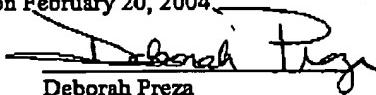
EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATE OF FACSIMILE TRANSMISSION
(37 C.F.R. 1.8 (a))

I HEREBY CERTIFY that this Amendment A, including Introductory Comments, Amendments to the Claims, Remarks, and a Terminal Disclaimer is being transmitted by facsimile to the United States Patent and Trademark Office, Art Unit 3677, Attn: Mr. Dinesh Melwani, (703) 872-9326 on February 20, 2004.

Dated: February 20, 2004



Deborah Preza

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FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)	(Col. 3) SMALL ENTITY		
Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	
Total 4	Minus 20	= 0	x \$9 =	\$0	
Indep. 3	Minus 9	= 0	x \$43 =	\$0	
First Presentation of Multiple Dependent Claim			+ \$145 =	\$0	
					Total Addit. Fee \$0

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 1) is less than 20, enter "20".
- *** If the "Highest No. Previously Paid For" IN THIS SPACE (Column 2, Row 2) is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

No additional fee for claims is required.

Very respectfully,

SIGNATURE OF PRACTITIONER

Reg. No. 28,761
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